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From fighting to farming: scrap metal in the form of derelict tanks and other debris from the many years of conflict is easy to find in Afghanistan. The ICRC launched a programme to transform this metal into farm implements. About 30,000 were produced in 1996.

ICRC/Z. Ahad

#### Indian sub-continent and Myanmar

ICRC delegations:

Afghanistan, Pakistan, Sri Lanka

ICRC regional delegation:

New Delhi

#### South East Asia and Far East

ICRC delegation:

Cambodia

ICRC regional delegations:

Bangkok, Jakarta, Manila

Staff

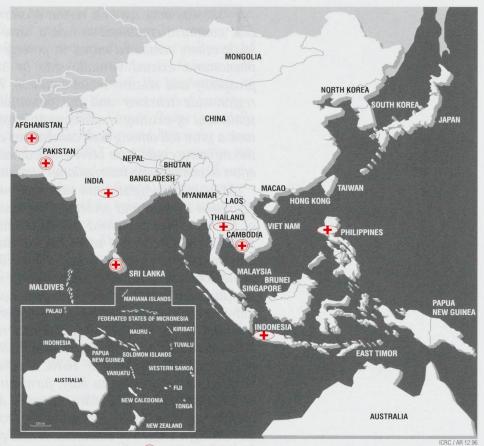
ICRC expatriates<sup>1</sup>: 167 National Societies<sup>1</sup>: 40 Local employees<sup>2</sup>: 1,462

Expenditure breakdown

**Total expenditure** 

Sfr 81,199,648

Expenditure breakdown	511
Protection/Tracing:	27,037,097
Relief:	20,418,910
Health activities:	18,633,033
Cooperation with	
National Societies:	1,997,405
Dissemination/promotion:	3,149,661
Operational support:	5,302,808
Overheads:	4.660.734



ICRC regional delegation 

• I

ICRC delegation

ASIA AND THE PACIFIC

<sup>&</sup>lt;sup>1</sup> Average numbers calculated on an annual basis.

<sup>&</sup>lt;sup>2</sup> Under ICRC contract, as at December 1996.

A sia was once again a region of sharp contrasts in 1996, as parts of the continent continued to ride a wave of unprecedented economic growth while others remained mired in poverty and strife. In some countries these phenomena existed virtually side by side. Even countries enjoying both prosperity and relative social cohesion, however, remained concerned about region-wide tensions and the potential for future conflict. Hopes for a settlement of existing conflicts went largely unfulfilled as fighting once again took a grim toll among both combatants and civilians. As in the past, much of the suffering could have been avoided had the warring parties made a greater

effort to comply with international humanitarian law.

Mine-ridden Afghanistan was once more the scene of the ICRC's largest operation in Asia, and protecting and assisting civilians caught in the middle of the war there remained one of its most arduous tasks. The residents of Kabul were sorely tried as months of dogged fighting brought death, injury, hunger and deprivation. When the Taliban captured the Afghan capital in September, the front lines shifted north and west, filling the roads with new multitudes of people driven from their homes. Throughout the year, delegates did what they could to ease the suffering: they supplied food and other essential items, conducted agricultural rehabilitation programmes, provided large-scale assistance to medical and surgical facilities and fitted amputees with artificial limbs. The ICRC's rehabilitation of Kandahar's Mirwais hospital was completed in May, furnishing south-western Afghanistan with a well-equipped surgical facility. Accepted as a neutral intermediary throughout the country, the ICRC expanded its protection work as it gained access to increasing numbers of detainees. It also pursued its efforts to promote respect for humanitarian law.

Hopes for a settlement to the long-running conflict in Sri Lanka continued to be frustrated in 1996. Government forces retook territory in the north of the island while a series of spectacular and bloody bomb attacks in the capital Colombo further dimmed hopes for an end to the fighting. Meanwhile, the security situation in the east of the country made living conditions increasingly difficult and signs of malnutrition began to appear. The ICRC strove to meet the needs of civilians living in northern and eastern Sri Lanka, afflicted as those areas were by both conflict and drought: it distributed relief supplies, carried out water and sanitation projects, helped provide basic health care and ran agricultural rehabilitation programmes. Delegates visited detainees in the hands of the Sri Lankan army, the Sri Lankan police and the Liberation Tigers of Tamil Eelam, and endeavoured to promote compliance with humanitarian law among all those involved in the conflict.

The rest of the Indian sub-continent witnessed considerable political change as new governments took over in India, Pakistan and Bangladesh. The

ICRC regional delegation in New Delhi continued developing its programme to promote knowledge of and compliance with humanitarian law among the Indian armed forces and police. Delegates completed their first full year of visits to people detained in connection with the situation in Jammu and Kashmir. No progress was achieved in discussions with the authorities of Myanmar, however, about the possibility of visits to detainees in that country.

Dissension within both the government and the Khmer Rouge generally served to attenuate fighting in mine-infested Cambodia and hopes for some form of national reconciliation endured. The ICRC remained active in the areas of detainee welfare, blood collection, material assistance to health-care facilities, prosthetic/orthotic activities, promoting compliance with humanitarian law and raising awareness of the danger posed by mines. It continued its work to restore family contacts, though on a smaller scale than in the past.

The activities of the regional delegation in Hong Kong were transferred to the regional delegation in Bangkok, which took over the ongoing task of strengthening ties with the authorities and the National Societies in the

countries of the Far East.

Disturbances on the island of Java, continued violence in East Timor and a dramatic hostage crisis in Irian Jaya mobilized delegates based at the ICRC's regional delegation in Jakarta, in addition to their regular work for detainees in various parts of Indonesia and their activities to promote humanitarian law.

Some progress was achieved in the peace process under way in the Philippines. The regional delegation in Manila pursued its detainee-welfare activities and strove to ensure that the civilian population was spared the effects of residual fighting. With violence continuing to flare on the island of Bougainville and large numbers of people being forced to flee their homes, the ICRC offered its services to the authorities of Papua New Guinea.

The ICRC was gratified to note that the Philippines ratified the 1980 UN Weapons Convention and that Palau became party to the Geneva Conventions

and their Additional Protocols.



# Indian sub-continent and Myanmar

# **AFGHANISTAN**

he year began with Afghanistan divided into five zones. Much of the south and west of the country was controlled by the largely Pashtun Taliban, the Kandahar-based movement led by Mullah Mohammad Omar. The northeast was ruled by the Tajik-dominated Kabul government headed by President Rabbani and Commander Massoud. To the east around Jalalabad was the neutral zone under the Nangarhar shura (council of elders), while the central province of Bamvan was under the control of Shiite leader Karim Khalili's Hezb-i-Wahdat. The north of the country, finally, was held by the predominantly Uzbek forces of General Dostom. In June the ethnic base of the Kabul government was broadened somewhat when Gulbuddin Hekmatyar,

Pashtun leader of Hezb-i-Islami, became Prime Minister of the Kabul government.

The first months of the year were particularly cruel ones for the residents of Kabul, who had borne the brunt of the fighting over the years. With industry and infrastructure devastated and many residential areas largely destroyed, a high number of Kabulis were displaced, unemployed and deprived of basic necessities such as clean water. A blockade on the city as the year started allowed through only a trickle of essential provisions. Though the supply situation eventually eased, Kabul remained the focus of military action for most of the year.

In August, the Taliban launched an offensive directed first at Jalalabad and neighbouring provinces, then at Kabul itself, which was finally taken on 27 September, placing two-thirds of the country in Taliban hands. The head of the ICRC delegation thereupon sought and obtained guarantees from senior Taliban officials that the organization's operations could continue. Delegates swiftly resumed support to Kabul hospitals, and prosthetic/orthotic work

Taliban offensive

proceeded uninterrupted, as did medical and detainee-welfare activities throughout the country.

In the months before the capital changed hands, while the Rabbani/Massoud forces were confronting the Taliban to the south, there were daily rocket attacks and cases of indiscriminate shelling and sniper fire, with many civilians being killed and many more wounded. The delegation protested on a number of occasions to the parties responsible for these violations of humanitarian law and, as the Taliban advanced on the city, stepped up its representations in an attempt to persuade the warring parties to spare the civilian population and ensure that routes into Kabul remained open for food and medical supplies.

After the fall of Kabul, the fighting moved northwards to the mouth of the Panjshir valley. The year ended with clashes continuing in the north-east and north-west as the Taliban faced a hostile coalition of the forces of Dostom, Khalili, Rabbani and Massoud. International efforts to bring an end to the

protracted suffering of the Afghan people had once again failed.

Although there were radical changes in the military situation over the year, the ICRC maintained good working relations with all the major parties. Its operations were virtually unaffected by the fighting and, acting as a neutral intermediary, it was able for the first time to arrange for the mortal remains of several dozen fallen combatants from Taliban and Massoud forces to be transferred to their respective sides. In January, the ICRC signed a Memorandum of Understanding with the International Federation of Red Cross and Red Crescent Societies setting out the division of tasks between the two organizations for their activities in Afghanistan, with the Federation responsible for helping the Afghan Red Crescent Society to develop non-conflict-related work (public health, etc.) and the ICRC covering conflict-related activities (first-aid posts, etc.). Under the agreement the ICRC retained its leading role.

In early 1996, continual rocket attacks combined with economic chaos and harsh weather to place a stranglehold on a hard-hit and increasingly desperate Kabul. With supplies running low, inflation spiralling and acute malnutrition on the rise, the ICRC repeatedly lengthened the list of particularly vulnerable families<sup>1</sup> (those headed by disabled breadwinners, widows, recent returnees and the utterly destitute — a quarter of the capital's estimated population) covered by its relief programme in the city. Delegates distributed wheat flour, beans and vegetable oil to the beneficiaries. Finally, with access roads all but cut, the ICRC organized an airlift from Peshawar, Pakistan, and flew in some 900 tonnes of food in February, enough to sustain 100,000 Kabulis for one month. When in March two of the four access roads were reopened to commercial and humanitarian traffic, the airlift was ended. However, as other organizations assisting vulnerable families did not receive the funding

stranglehold on Kabul

<sup>&</sup>lt;sup>1</sup> The ICRC bases its distributions on the family unit, calculated as equal to six persons.

necessary for their work, the ICRC, acting in conjunction with the Afghan Red Crescent Society (ARCS), extended its distributions still further, with half-rations and non-food items (clothes, blankets, heating fuel, etc.) going to some 15,000 additional families.

Surveys revealed that despite the restoration of road traffic into Kabul, the food situation remained precarious and the nutritional status of the most vulnerable members of the population — particularly children and widows — was deteriorating, even during the traditionally bountiful summer months. To monitor future trends in a city with its population swollen by the fighting, the delegation instituted a weekly market survey and a system of anthropometric measurements of children in ARCS clinics.

After the Taliban gained control in September, the ICRC continued its distributions in Kabul unabated and hired private contractors to bring 1,500 tonnes of food per month into Kabul from Peshawar, enabling additional non-food items (stoves, coal, candles, matches, plastic sheeting and soap) to be distributed as another severe Afghan winter began.

But relief work, like the war itself, was not confined to Kabul. Economic collapse forced people into poverty just as the fighting forced them from their homes. Across Afghanistan, delegates worked with the Afghan Red Crescent Society to come to the aid of vulnerable families, many of them displaced. Each sub-delegation maintained stocks of non-food items so as to be able to respond rapidly in the event of emergency. Ad hoc distributions were carried out when needed. Among its many other activities, the National Society played an invaluable role in identifying the people most in need of assistance.

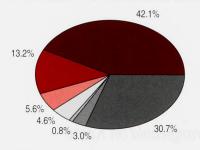
Following high-level contacts with — and a great deal of cooperation from — the authorities in Mazar-i-Sharif and Kabul, the ICRC received permission to transport both food and medical and prosthetic/orthotic items to and from the two cities. As part of the road north of the Salang tunnel was heavily mined, the ICRC asked the Halo Trust, a British non-governmental mine-clearing organization, to make it safe for the passage of the planned transports. This it did with much courage and skill, and the first convoy in two years was able to pass. Many more convoys transporting relief and/or medical supplies were to follow.

ICRC support for some 7,000 families, most of them displaced from the Tagab Valley and living in the Samarkhel camp near Jalalabad, was suspended in August as the security situation had improved substantially in their home area. The running of the camp had been delegated to the Swedish Red Cross in 1995, with the ICRC retaining overall responsibility, and food-for-work schemes had been set up to encourage the families to return home. Though the Taliban offensive against Kabul brought fighting back to the Tagab area, about half of the camp dwellers had returned there by year's end.

dire situation in the provinces

#### AFGHAN CONFLICT

Total expenditure in 1996: **Sfr 48,321,269** 



Protection / tracing

Relief

Health activities

Cooperation with the National Society

■ Dissemination / promotion

Operational support

Overheads

In late 1996, relief work was intensive in the north-west as many thousands of people, displaced by the clashes in Badghis province between the Taliban and General Dostom's forces, streamed into Herat.

Under the ICRC's agricultural programme in Afghanistan, which was launched in 1995, work continued to revive cultivation of arable land, restore a degree of self-sufficiency among the rural population and generally stimulate food production in war-ravaged Afghanistan. The programme also served as an opportunity both to spread knowledge of humanitarian law and to alert people to the danger of mines.

Implemented with the cooperation of the Afghan Red Crescent Society, the programme was aimed at the country's most disadvantaged rural families, including displaced people and recent returnees. One objective was to rehabilitate wells and irrigation systems, so vital in the aggressively dry and windy conditions prevailing in Afghanistan. Over 300 km of surface and underground irrigation channels that had been neglected or even deliberately destroyed during the long years of warfare were cleared and repaired in 1996 on a foodfor-work basis (7 kg of flour per person per day), bringing the total to some 500 km restored to working order since the programme began.

In addition, locally purchased seeds (onions, carrots, leeks, okra and radish) and, in Kabul province, tomato, pepper and eggplant seedlings were distributed to selected farmers. The seed and seedlings distributed were always accompanied by sets of agricultural implements produced under an ICRC income-generating project by craftsmen in Kabul, Parwan and Badakhshan who transformed metal from derelict tanks and other weapons of war into spades and shears. This provided paid work not only to the tool-makers themselves but also to about a hundred families involved in the collection of scrap metal.

Rich in calories and vitamins, and therefore useful in disease prevention, fruit is a traditional component of the Afghan diet and a crop that has been particularly hard hit by the war. Pest-control and tree-planting projects were therefore launched in selected areas.

As casualties among combatants and non-combatants alike remained high in 1996, the ICRC continued to help hard-pressed surgical facilities treating the war-wounded. It also gave ad hoc assistance to some 60 other facilities, including dispensaries and clinics, across Afghanistan. During the heavy fighting to the south of Kabul throughout the first nine months of the year, the ICRC provided massive support, including both medical and non-medical supplies, food, equipment and financial support for staff, to the capital's Karte Seh and Wazir Akbar Khan hospitals, the surgical department of the Jalalabad Public Health Hospital (laundry and kitchen entirely renovated) and the provincial hospital in Ghazni. The six-month reserve stock of medical supplies

restoring self-sufficiency among rural population

assistance to surgical facilities

built up by the delegation proved adequate as the battle lines swept north of Kabul in the final months of the year.

Work undertaken in 1995 to rehabilitate Kandahar's Mirwais hospital and install a new 150-bed surgical ward was completed in May. Equipment was purchased, training by expatriate specialists began for local staff and the first patients were admitted in June. When the front moved north of Kabul following the Taliban victories in September, and hospitals in the capital were consequently stretched to the limit, it was thus possible to evacuate hundreds of casualties south to Mirwais (others were taken to Jalalabad). To help cope with the emergency, the ICRC dispatched a surgical team to Kandahar from its surgical hospital in Quetta.

Since patients from the Kandahar region, which has a population of 1.5 million, no longer had to be transferred to the ICRC hospital across the border in Quetta, Pakistan, this facility was closed down, as was the first-aid post set up in Kandahar pending completion of the work on Mirwais.

With battles raging south of Kabul through much of the year, the ICRC's first-aid posts in Sheikhabad and Pul-i-Alam treated casualties from the front lines. The Charasyab post was operational only intermittently owing to the poor security conditions. Mir Bachakot to the north continued to receive casualties, who were subsequently evacuated south to Kabul or north to Charikar.

Blood banks were built and equipped, and staff trained, in Kandahar and Ghazni.

The prolonged war in Afghanistan has had a major effect on the health of the people. Those who have remained uninjured have nevertheless suffered from the indirect consequences: malnutrition, the breakdown of health-care services and a sharp fall in living standards. Unable to ignore their plight, the ICRC engaged in activities not wholly intended for the direct victims of warfare. Mirwais hospital's surgical department, henceforth catering for the surgical needs of the entire civilian population of the south-western provinces, was one example. Another was the growing number of people other than war-injured who were being admitted to the ICRC's prosthetic/orthotic rehabilitation centres.

The millions of anti-personnel landmines scattered throughout Afghanistan once again took a very heavy toll among both combatants and civilians. To cope with the large number of victims, the ICRC continued running its prosthetic/orthotic centres in Kabul, Jalalabad, Herat and Mazar-i-Sharif. In the capital, repair work went on at the Ali Abad centre, which had been badly damaged in 1994. The temporary workshop, set up in the grounds of the Wazir Akbar Khan hospital, further increased its output of components, artificial limbs and orthopaedic appliances. It supplied parts and raw materials to the three centres attached to the sub-delegations as

landmines' terrible toll

well as to workshops run by other organizations. In addition, surgeons and prosthetic technicians held seminars on amputation techniques and stump revision in the country's major hospitals.

As therapy for Afghans with spinal cord injuries and other disabilities was not available locally, a number of polio and paraplegic cases received orthoses and/or treatment in ICRC or ICRC-supported facilities, including the Pakistan Red Crescent Society's paraplegic centre in Peshawar, where their treatment was financed by the ICRC. The production of orthoses at ICRC workshops was therefore stepped up.

Kabul's infrastructure has been steadily deteriorating since 1992: water mains have been wrecked and collection and treatment of household refuse and human waste have grown erratic. To counter the greatly increased risk of infectious disease, the ICRC again worked to improve water supplies and sanitation in 1996, mainly by sinking new wells, chlorinating existing wells, disposing of waste and building latrines and washing facilities. Water and sanitation engineers were also active at ICRC-assisted health-care facilities and in places of detention.

The ICRC was granted access by the Taliban, and the other parties, to a growing number of detainees being held by them, as a result in particular of the fall of Kabul and the fighting that ensued. These included newly captured combatants. In many places, visits became monthly events. The ICRC was for the first time allowed to visit a number of places of detention in Kabul and to see persons held by the Hezb-i-Wahdat and Harakat-i-Islami factions. Widening access early in the year led to a sharp increase in detention-related work, including sanitation. Acting as a neutral intermediary, the ICRC also repatriated a number of Pakistani detainees released by the Rabbani government.

Several places, such as Kabul and Jalalabad, changed hands during the year. The detainees whom ICRC delegates had been visiting up to that point were thereupon released as prisons were emptied by the new authorities. Within a short time the delegates were back visiting the same places, this time holding those newly detained by the new authorities.

In the first half of the year the ICRC held a series of seminars for prison authorities from Kabul, with participants from all government-run facilities, including the General Prosecutor.

The ICRC worked with Afghan Red Crescent branches throughout the country to forward Red Cross messages between detainees and their families and, in the absence of reliable postal services, between members of families separated by the fighting. Where possible and desired, it used its aircraft to reunite them. The Kabul delegation and the Mazar-i-Sharif sub-delegation

cleaning up the water supply

access to detainess



- visited and registered
   3,679 detainees 2,802
   for the first time in 63
   places of detention held by
- the Kabul authorities and the other parties;
- forwarded 5,879 Red Cross messages between the detainees and their families:
- issued 41 detention certificates.



- forwarded 14,141 Red Cross messages between individual civilians and their families;
- reunited with relatives 89 members of dispersed families.



- distributed some 25,500 tonnes of food and nonfood relief to a total of about one million particu-
- larly vulnerable Afghan civilians, some 200,000 of them in Kabul.
- organized the clearing and repair of 300 kilometres of irrigation channels

#### IN 1996, THE ICRC:

- and oversaw 3 well-rehabilitation projects, thus providing 450 tonnes of flour to 3,500 families taking part in the food-for-work scheme;
- distributed about 30,000 locally produced agricultural implements to 10,000 families.
- distributed 88 tonnes of seed and seedlings to 10,000 families;
- treated 300,000 fruit trees and 9,100 vines against pests;
- ultimately assisted over 90,000 farming families through the programme.



- fully supported 5 Afghan hospitals, which admitted a total of 5,198 people suffering from war-related
- injuries, and provided ad hoc support to 15 other hospitals around the country, which treated 3,183 warwounded:
- collected 7,836 units of blood in 5 hospital blood banks;
- supported a number of dispensaries and other medical facilities.



- manufactured 4,443 prostheses and 1,550 orthoses, and fitted 3,308 disabled people with such
- appliances in 4 rehabilitation centres.



 chlorinated and checked 22,000 wells and built some 100 latrines in Kabul.



 provided assistance to the headquarters, three regional offices and 24 provincial branches of the

Afghan Red Crescent Society.

organized training seminars for ARCS staff on restoring contact between members of families separated by the fighting.

Dissemination was a fully integrated part of the delegation's day-to-day work. Together with the National Society, it made every effort to promote compliance with humanitarian law and respect for Red Cross and Red Crescent principles, and to consolidate a nation-wide network to spread knowledge thereof among combatants, Afghan Red Crescent staff and the general population. Many special events were organized to this end and calendars and other items were distributed. Parallels between humanitarian law and local values and customs were also drawn in consultation with Afghan scholars, artists and journalists. In particular, a seminar on the law of war and humanitarian values in Afghan culture was conducted at Kabul University for 160 scholars and representatives of national organizations. Following the Taliban's capture of Kabul, the delegation continued its efforts, adapting them where necessary. It endeavoured to reach as wide an audience as possible, in particular through radio, with interviews, short programmes and promotional spots, and continued to participate in the serialized BBC\* radio drama New home, new life, produced in Pashto and Dari.

As the February airlift focused renewed media attention on the Afghan conflict and its effects on the civilian population, the delegation began providing logistical support for visits by a growing number of journalists. It was therefore decided to base an expatriate press officer in Kabul indefinitely.

The Afghan Red Crescent Society (ARCS) remained the ICRC's main partner; cooperation continued throughout the year at national level and projects at the local level were largely unaffected by military events. The ARCS was gradually restoring its national network<sup>2</sup> and expanding its relief, tracing and dissemination work, with support from the ICRC and the Federation. ICRC support included renovation of ARCS premises, assistance with running costs, training in administration, relief and the restoration of family contact, and incomegenerating projects such as raising poultry and refurbishing buildings to be used as guest houses. The National Society continued operating first-aid posts and health-care clinics, and made an invaluable contribution to agricultural rehabilitation and the location of potential beneficiaries of prosthetic/orthotic programmes. It also made improvements to homes (marastoons) that it runs for the most severely disadvantaged individuals, such as orphans and the mentally ill, in the major cities; some such homes that had been closed were reopened. In conjunction with the ICRC, the National Society organized seminars for its staff on the Movement's principles and the ICRC's mandate and work.

promoting law of war

partnership with Afghan Red Crescent

<sup>\*</sup> British Broadcasting Corporation

<sup>&</sup>lt;sup>2</sup> Across the country branches were reactivated, others strengthened; at year's end there were branches operating in 31 of the 32 provinces.

# **PAKISTAN**

The year ended with Pakistan once again under caretaker administration as the Pakistan People's Party government was forced to resign. Elections were scheduled for February 1997.

Throughout the year, the delegation in Islamabad cultivated contacts with government authorities, officials of the Pakistan Red Crescent Society, diplomatic circles and international organizations in order to promote support for the role and work of the ICRC in the region, particularly in Afghanistan, and to brief them on the organization's work in Jammu and Kashmir. A delegate specializing in the teaching of international humanitarian law to armed forces personnel went to Pakistan to discuss further humanitarian law courses for senior military officers, and the Delhi-based legal adviser travelled there in June, and again in December, in connection with national measures to implement that body of law. Both missions laid the groundwork for future cooperation between the ICRC and the Pakistan government and armed forces. The delegation also continued to contribute to the BBC radio serial *New home, new life*.<sup>3</sup>

ICRC Pakistan continued to provide key support for the organization's medical and relief operations in Afghanistan; the Peshawar sub-delegation maintained stocks of relief supplies and generally served as a logistics base and transit point.

With the newly renovated Mirwais hospital in Kandahar scheduled to open in June, the ICRC's surgical hospital in Quetta, just across the border, began in March to train part of the new facility's staff. Although it had played a vital role over the years in treating people wounded in the Afghan conflict, the Quetta hospital saw a gradual decline in the number of casualties admitted as fighting diminished in south-west Afghanistan. Apart from an upsurge in May, admissions remained low in 1996 and, as Mirwais was increasingly covering the surgical needs in the southern part of the country, the ICRC decided to close the Quetta facility. An office was kept open to maintain contact with local authorities and provide logistical support for the Kandahar sub-delegation. The first-aid post in Chaman run jointly with the Pakistan Red Crescent Society was also closed. Both the premises and part of the equipment were handed over to the National Society.

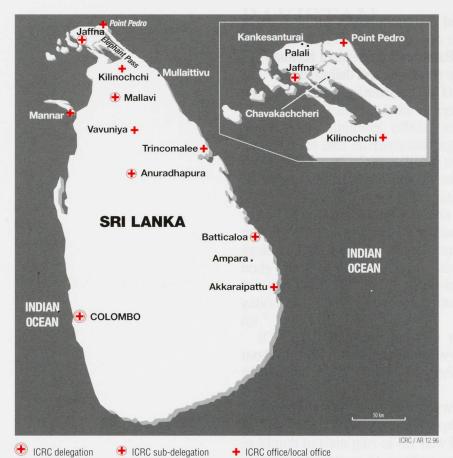
The ICRC continued to finance treatment for Afghan patients and a number of Pakistanis at the Pakistan Red Crescent Society's paraplegic centre in Peshawar. This support was discontinued, however, when the centre was privatized at the end of the year.

closure of Quetta hospital

<sup>&</sup>lt;sup>3</sup> See Afghanistan p. 137.

Elsewhere in Pakistan, the ICRC donated two ambulances to the Karachi branch of the National Society and paid their operating costs. It also continued to support the Society's mobile eye clinic in Pakistan-administered Kashmir.

Finally, delegates collected 209 Red Cross messages and delivered 686. The ICRC issued 1,180 ICRC travel documents in Pakistan, mostly to Afghan refugees for resettlement in third countries.



#### SRI LANKA

s the period under review opened, the stage was set for another year of violence and bloodshed: Sri Lankan government forces were poised to continue their reconquest of the Jaffna peninsula, after capturing Jaffna town in December, and the LTTE\* was redeploying its fighters in the jungles of the nearby Vanni region while continuing to take the struggle to the heart of the Sri Lankan capital, Colombo. A government offensive in late April and early May brought most of the rest of the peninsula under government control after years of LTTE domination, and hundreds of thousands of people who had headed south and east to escape the fighting were able to return to their homes. There followed months of attack and counterattack as government forces attempted to press on into the LTTE-held areas to the south. Resulting casualties were high among combatants on both sides and, as in the past, civilians were killed or injured. Meanwhile, the need for humanitarian aid

grew in the east of the country owing to restrictions imposed by the government on the transport of goods to areas in which LTTE forces were present.

Indiscriminate attacks and deliberate massacres, though less frequent than in the past, remained a feature of the conflict in Sri Lanka, and the violence once again affected combatants and non-combatants alike. Delegates collected information on such incidents and made confidential representations — both oral and written — to the parties involved, reminding them of their obligation to comply with humanitarian law, and especially to spare civilians and their property. This was a matter of particular concern in the east of the island, where armed clashes grew fiercer and more frequent.

The ICRC was also gravely concerned about violations of humanitarian law committed in the course of military attacks in which it was obvious that no quarter had been given to defenders who were wounded or sought to

<sup>\*</sup> LTTE: Liberation Tigers of Tamil Eelam, the main armed Tamil opposition

surrender, and made vigorous representations about these incidents to the

parties concerned.

The shifting military situation required flexibility on the part of the ICRC. In late 1995 it had relocated its staff from Jaffna town to Point Pedro in order to remain close to the victims as hundreds of thousands of civilians fled the fighting; in June 1996 it was able to reopen its Jaffna sub-delegation while maintaining a liaison office in Point Pedro. As people fled their homes southwards, the organization opened a sub-delegation in Kilinochchi, only to be obliged to transfer it to Mallavi several months later when a government offensive against Kilinochchi forced 150,000 people once more onto the roads.

In 1996, the ICRC again worked to protect and assist the victims of the armed conflict in Sri Lanka and to promote compliance with humanitarian law. It also again acted as a neutral intermediary between the parties to the conflict; for example, it retrieved and returned the mortal remains of fallen combatants that were in the possession of the other side. In LTTE-controlled areas, delegates assisted the Ministry of Health in its national polioimmunization campaign and accompanied officials of the Sri Lankan Ministry of Education, giving them the protection of the red cross emblem as they supervised school examinations.

The plight of the displaced civilians who fled into the Vanni region in April was a source of great concern to the ICRC and other humanitarian organizations working in the area. While appealing to the government to dispatch supplies to the area, the ICRC launched a relief operation in conjunction with local branches of the Sri Lanka Red Cross Society. Delegates distributed non-food assistance to particularly vulnerable families to improve their conditions of health and hygiene and provide better shelter; they also set up a stock of essential non-food items to cope with any future population movements.

Signs of malnutrition were detected mainly in the east of the country, in particular Batticaloa and Trincomalee districts. After conducting a survey there, the ICRC launched an agricultural rehabilitation programme in order to help them produce additional means of sustenance: seed, farming tools and

fishing nets were distributed to the population of isolated villages.

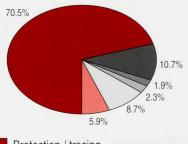
As in previous years, the ICRC regularly escorted government relief convoys travelling in areas of the north and east of the country from which the security forces had withdrawn, bringing badly needed supplies to civilians. It did the same for government ships bound for the Jaffna peninsula with relief supplies until the government offensive in May ended the need for such escorts. The new situation there also eventually allowed the ICRC to cease its own shipments to the peninsula of government-supplied food and other essential goods.

Between January and July, an ICRC-chartered ship was the sole independent means of transport between the Jaffna peninsula and Trincomalee. ICRC's role as neutral intermediary

relief convovs escorted to north hygiene and drinking water for displaced

SRI LANKA

Total expenditure in 1996: **Sfr 12,356,122** 



Protection / tracing

Health activities

Cooperation with the National Society

Dissemination / promotion

Operational support

Overheads

Staff of various non-governmental organizations used the ship to reach the north in order to assist the civilian population there. Medical supplies, relief items and mail were also transported. Following the LTTE attack on the Mullaittivu military base and a general escalation of the conflict in the north, the ICRC was obliged to suspend service for one month pending a new agreement with the parties concerned. The weekly rotation between Kankesanturai, on the peninsula, and Trincomalee for patients requiring treatment in Colombo and people wishing to be reunited with their families was suspended in May and resumed only in September, when government authorization to do so was once again granted.

With such enormous numbers of displaced civilians suddenly living in areas without adequate facilities, hygiene and clean drinking water became a priority concern for the ICRC, particularly in view of the prevailing drought. Sanitary engineers worked to prevent outbreaks of water-borne disease in camps on the Jaffna peninsula, in the Vanni region and in Eastern Province by sinking new wells, deepening, strengthening and disinfecting existing ones, repairing pumps, organizing refuse clearance, building latrines and installing water tanks. ICRC medical staff distributed leaflets and took various other steps to promote hygienic practices and facilitate basic health care.

Acceptance by all parties of the ICRC's mandate from the international community to come to the aid of conflict victims was indispensable for its protection and assistance work. Unfortunately, that acceptance was sometimes difficult to achieve. Although the Sri Lankan authorities allowed the ICRC to launch water and sanitation projects in LTTE-held areas in the Vanni region and the east of the island, they were reluctant to permit the use of certain chemicals essential for disinfection; this led to delays. They also sometimes refused permission for the transport north of medical supplies crucial for the treatment of the war-wounded and the activities of mobile health-care teams run by the Sri Lanka Red Cross Society under ICRC supervision. The work of those teams was severely jeopardized by the extremely slow pace of government authorization.

There was a general increase in the workload of the National Society's mobile health-care teams. To improve access to medical care, the ICRC helped to set up and provided support for two additional teams in the Vanni region, bringing to six the number operating there. Delegates took over responsibility for the running of two teams in eastern Sri Lanka, owing to the crossline nature of their work, whereas the Ampara team there was disbanded as needs were now covered by other facilities. Finally, two teams on the Jaffna peninsula ceased operation following the government take-over there and the resulting renewed access to adequate care. In all, ten teams were in operation as the year ended. The ICRC continued its support for the seven primary health-care

centres run by the Sri Lanka Red Cross in the Mannar Mainland district and four new posts were set up in the Kilinochchi and Mullaittivu areas, providing first aid and basic health care.

The ICRC continued to follow regularly the work of and assist government health-care facilities in Northern and Eastern Provinces. In conjunction with the Ministry of Health, it organized a course for 30 midwives in Batticaloa.

A series of bomb attacks and other security incidents in the capital Colombo led to a sharp rise in individual arrests as well as large-scale round-ups and cordon-search operations carried out by the authorities to find LTTE sympathizers. The ICRC closely monitored the situation and adjusted accordingly its detainee-welfare activities already under way for those held under the Emergency Regulations and the Prevention of Terrorism Act. Throughout the year, delegates visited and registered large numbers of people being held in prisons, police stations, military bases and other places, including, as of May, the Kankesanturai police station and its new lock-ups on the Jaffna peninsula. Finally, the ICRC informed detainees' families of their relatives' incarceration in cases where they had not been notified by the authorities.

Despite military developments, the ICRC continued to visit the few detainees — including army and navy personnel — being held by the LTTE in the north, and visited and registered a number of new LTTE-held detainees in the east. However, though allowed to see the detainees themselves, delegates continued to be refused access to the places in which they were being held. The LTTE handed over to the ICRC 20 Sinhalese civilians, including 16 fishermen, whom they had been holding and delegates arranged for their return to their families.

The massive displacement of civilians, particularly in April and May, caused many families to be split up. The ICRC was therefore increasingly active in restoring contact between members of such families. In some cases it was possible to reunite them. Red Cross messages also continued to be forwarded via National Red Cross and Red Crescent Societies between Sri Lankans deprived by the conflict of access to normal postal services and relatives living abroad. Acting in conjunction with the government's own investigative commission, the delegation continued its efforts to trace people who had been missing for months or even years. The delegation received a number of tracing requests from families of servicemen who had been declared missing in action.

Work to spread knowledge of and improve compliance with humanitarian law continued. During their dealings with military personnel, police forces, LTTE combatants, members of other Tamil groups and all other bearers of weapons, delegates took every possible opportunity to explain the basic rules of that law and the role and mandate of the ICRC itself. At a more formal level, the ICRC provided special training in humanitarian law for military instructors, and particular attention was given to military academies. Other training events

detainee-welfare activities

restoring contact between separated families

were organized throughout the police, including the Special Task Force, and with the help of a retired British police officer a seminar on humanitarian law and human rights law was set up for high-ranking police officers. Sessions were also held for medical staff and members of the Sri Lanka Red Cross Society working in the mobile health-care teams, and contacts were cultivated in academic circles.

A special effort was made to increase knowledge and understanding of the ICRC through articles on its work in Sri Lanka published in English-language, Sinhalese and Tamil newspapers.

# - visited 3,196 detainees in 228 government-run places of detention, including 74 persons held in connection with the 1987-90 uprising by the Janatha Vimukti Peramuna party, the Sinhalese opposition; delegates registered 2,553 new detainees;

- visited 64 detainees held by the LTTE;
- forwarded 5,899 Red Cross messages between detainees and their families.
- issued 23 detention certificates.



- organized the reunification of 17 families, mostly by escorting isolated family members out of conflict
- zones to where relatives were living or had taken refuge;
- opened 1,440 tracing files;
- resolved 580 cases;
- forwarded 13,881 Red Cross messages between individual civilians and their families;

#### IN 1996, THE ICRC:



- distributed some 3,275
   rolls of plastic sheeting,
   48 tonnes of soap, 6,672
   sets of cooking utensils,
- 1,000 jerrycans, 12 tonnes of clothing and 33 tonnes of other relief to particularly vulnerable families;
- as part of its agricultural rehabilitation programme in Eastern Province, distributed some 218 tonnes of seed, 2,200 fishing nets and 4,000 hoes to particularly vulnerable families;
- shipped to the north some 2,000 tonnes of flour, 350 tonnes of other relief items and 160 tonnes of medical supplies provided by the government.



- transported 155 people requiring specialized medical treatment from the Jaffna peninsula to the south;
- furnished the medical supplies needed to run 10 mobile health teams and 13 primary health-care centres in the Vanni and Eastern Provinces.



- provided pipes, pumps, chemicals and other materials for over 50 watersupply and sanitation
- projects:
- installed 55 pumps.



- held dissemination sessions in the field for about 1,500 police officers, 672 Special Task Force person-
- nel, 2,700 government military personnel, 300 LTTE combatants and 50 members of the People's Liberation Organization of Tamil Eelam;
- also organized sessions for about 800 school pupils, hospital staff, local authorities and members of the general public.

# **NEW DELHI**

Regional delegation (Bangladesh, Bhutan, India, Maldives, Myanmar, Nepal)

The period under review was the first full year of ICRC protection work in Jammu and Kashmir. Three teams — each composed of a team leader, a delegate, a doctor and three Urdu-speaking interpreters — visited persons arrested in connection with the situation in the state and held in police lockups, jails and sub-jails both there and in other parts of India. The number of places visited grew and a pattern of follow-up visits was developed. Although the programme for visits occasionally suffered delays due to the security situation, the ICRC managed to overcome difficulties arising from the April/May nation-wide general elections and the September state elections in Jammu and Kashmir. The ICRC's first comprehensive written report on its findings was handed over to the government of India by the Delegate General for Asia and the Pacific on 26 June. A follow-up meeting was held in September with the Minister of Home Affairs.

In cooperation with instructors of Indian military, paramilitary and police forces, the ICRC provided humanitarian law training for all ranks. It organized the first-ever such courses for Indian forces serving in Jammu and Kashmir: five one-day sessions were held for high-ranking officers of the BSF\*, one of India's main paramilitary forces, and the CRPF.\* These were followed by half-day briefings at BSF headquarters. At the BSF's request, the ICRC booklet *Code of conduct for combatants* was translated into Hindi. The Delhi-based delegate to the armed forces was also very active outside Jammu and Kashmir. Among other things he held a first-ever course on humanitarian law for BSF, CRPF and Indian Police Service officers at the North East Police Academy in Shillong. He also met high-ranking army officers to discuss the development of teaching modules on humanitarian law for military instructors.

In November a course was organized in Thailand for retired officers from South Asian countries who will assist the ICRC in its dissemination work in the region. One participant was still on active duty but had been disabled by a mine blast. The ICRC is confident that such instructors will convey the message with a great deal of credibility and authority.

The ICRC remained in regular contact with the headquarters of the Indian Red Cross Society and pursued its cooperation with that Society, particularly law of war instruction for armed forces

<sup>\*</sup> BSF: Border Security Force

<sup>\*</sup> CRPF: Central Reserve Police Force

regarding promotion of humanitarian law and the principles of the Red Cross / Red Crescent Movement. As part of the joint ICRC/Indian Red Cross Society (IRCS) programme to sponsor dissemination workshops for the National Society's staff throughout the country, the ICRC conducted two workshops for branches unable to attend the regional workshops held the previous year. One such workshop took place in Jammu for the Jammu and Kashmir branch and the other was held in Guwahati, Assam to cover the north-eastern states, an area affected by insurgency and counter-insurgency violence. A delegate specializing in cooperation with the National Societies arrived at the end of the year to work with the Jammu and Kashmir branch.

At the invitation of the Indian Centre for Humanitarian Law and Research, the ICRC gave an introductory presentation of international humanitarian law for 35 law professors from southern India. This was part of the ongoing joint effort with the Centre to ensure that that body of law is introduced as a subject in India's law faculties.

The media liaison office at the New Delhi delegation consolidated its existing contacts and worked to develop new ones throughout a large and linguistically diverse country, in particular with journalists covering events in Jammu and Kashmir. In conjunction with the Press Institute of India, the office held a workshop entitled *Humanitarian reporting of armed conflict*, attended by journalists, military personnel, academics, government officials and others from across India. It also successfully approached the Indian and foreign press for coverage of the anti-personnel mines issue and the ICRC's call for a total ban on these indiscriminate weapons.

An ICRC legal adviser joined the regional delegation in February to assist governments in taking measures at the national level to implement international humanitarian law.

Following the violent run-up to and aftermath of the February elections in Bangladesh, the deputy regional delegate travelled there in March to discuss with officials of the Bangladesh Red Crescent Society the emergency services available in the country and measures to deal with the effects of civil strife and other crises. The Delhi-based delegate to the armed forces had high-level discussions with the Bangladesh armed forces on the development of programmes to spread knowledge of international humanitarian law among the military.

The Delegate General for Asia and the Pacific went to Yangon in January for talks with the authorities of Myanmar on the possibility of ICRC visits to security detainees. No progress was achieved. In May, the regional delegate was joined by the head of the ICRC's prosthetic project in Cambodia for a mission to Myanmar to assess the programme under which civilian amputees living in remote border areas are transported to Mandalay and Yangon to be

contacts with the media

Missions to Myanmar

fitted with prostheses. The programme is run by local branches of the Myanmar Red Cross Society, financed by the Republic of Korea National Red Cross and supervised by the ICRC's regional delegation.

Delegates twice visited camps for Bhutanese refugees in eastern Nepal. They assessed conditions there and interviewed recent arrivals, mostly relatives joining their families and former detainees who had been visited by the ICRC in Bhutan. The ICRC supported work by the Nepal Red Cross Society to restore contact between members of families separated by conflict and continued to support the mailing service for Bhutanese refugees living in Nepal. A three-day course on humanitarian law was held for cadets of the Royal Nepalese Staff College and a separate course was held for military instructors.

In Bhutan, delegates carried out a series of visits to persons detained for "anti-national activities". As in the previous three years, these were conducted in accordance with the Memorandum of Understanding signed by the ICRC and the Bhutanese government.

Bhutanese refugees in Nepal

Ok le giror



# IN 1996, THE ICRC:

- visited 3,583 detainees (3,210 for the first time) being held in 41 places of detention in connection

with the situation in Jammu and Kashmir;

 visited 92 persons detained by the Bhutanese authorities for "anti-national activities".



- forwarded 363 Red Cross Messages, 266 of them between detainees and their families:
- issued 99 ICRC travel documents.



 in India, organized events to promote knowledge of and compliance with humanitarian law for 240

members of the Border Security Force, 70 members of the Central Reserve Police Force, 30 police officers in Shillong, 150 army personnel, 130 members and staff of the Indian Red Cross Society, 40 journalists and 90 law professors from around the country:

 in Nepal, provided humanitarian law instruction for 36 army officers.



# South East Asia and Far East

## **CAMBODIA**

he new year brought with it a renewed dry-season offensive by the RCAF\* against the Khmer Rouge stronghold of Pailin, in Cambodia's resource-rich north-west. Casualties were high. Political instability — including a deep rift in the country's coalition government — and the early onset of rains halted the advance, though the army managed to hold the ground it had taken. When the monsoon ended, fighting resumed and Pailin eventually fell to government forces in November. As the year progressed a rift also became evident within the Khmer Rouge and there were a number of defections to the national armed forces. As the year ended there appeared to be dissension within the military itself, with differences between the

government coalition partners apparently spreading to the RCAF.

An important development for the ICRC, which had long sought access to certain regions of the north-west, was its meeting in September with representatives of the newly formed dissident Khmer Rouge party known as the Democratic National Union Movement. The meeting took place in Phnom Malai, to which a team of delegates later travelled via Thailand to assess the needs of the civilian population. A second survey in the Phnom Malai, Pailin and Kamrieng area was under way as the year drew to an end.

The ICRC closed its office in Mongkol Borei and opened a small logistical unit in Sisophon, operating under the responsibility of the Battambang subdelegation. With many thousands of people still displaced in the north-west, the ICRC closely monitored the resettlement process, with particular attention

<sup>\*</sup> RCAF: Royal Cambodian Armed Forces

being paid to their safety and to compliance with humanitarian law, and reported violations to the authorities concerned. It also kept watch on the situation of Cambodians of Vietnamese origin.

Delegates visited detainees throughout the year in the provinces of Battambang, Banteay Meanchey and Siem Reap. The ICRC financed the transport of water to Sisophon prison to offset a severe shortage affecting the inmates there. It also carried out a large-scale programme of anti-scabies treatment at Siem Reap prison.

In May the organization gained access to security detainees held in Phnom Penh by the Ministry of the Interior, and in October was authorized to visit persons detained in Tuol Sleng, a prison in the capital run by the Ministry of National Defence.

The tracing service covered the entire country with the exception of a few areas that remained off-limits for security reasons. A tracing agent was able to reach Samrong district, which had been inaccessible for nearly a year. As the postal service remained erratic in the capital and virtually non-existent in outlying areas, the collection and distribution of Red Cross messages was a key activity for the tracing service, and the number handled grew as the scale of visits to detainees increased. The number of new tracing requests was relatively low but the percentage of cases resolved was high.

The gradual process continued of handing over to the Cambodian Red Cross Society the responsibility for restoring family contact. Over the first half of the year the ICRC reorganized its family-contact operation for Cambodia, transferring its database to Bangkok in April. The positive effects of this reorganization became apparent as the year progressed.

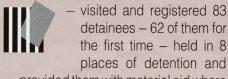
As in the past, and doubtless the future, anti-personnel landmines remained a blight on Cambodia, their consequences affecting all aspects of national life. The delegation there was particularly active in the ICRC's worldwide campaign for a ban on these weapons. For national mine-awareness day delegates helped produce — and the ICRC sponsored — four radio spots and a theatrical production, prepared an exhibition on landmines, arranged for the television broadcast of an ICRC film on the effects of these cruel devices and took part in other public events. The delegation also briefed and assisted a number of foreign journalists visiting the country to report on the heavy toll taken by mines among both military personnel and civilians. In September, Cambodia ratified the 1980 UN Convention on the use of certain conventional weapons "deemed to be excessively injurious or to have indiscriminate effects". To mark the occasion, the King of Cambodia accorded the head of delegation a private audience during which he assured the ICRC of his continued support.

One direct result of the landmines infesting Cambodia was, as always, the high number of amputees. The ICRC's prosthetic/orthotic project in

tracing services

blight of landmines

### IN 1996, THE ICRC:



places of detention and provided them with material aid where needed.



- opened 484 tracing files, resolved 334 cases and forwarded 4,644 Red Cross messages.



collected 16,710 units of blood in 14 centres.

produced 1,256 complete prostheses and 30 complete orthoses for its own programme; for other organizations it produced 1,953 knee joints, 87 functional hooks, 114 cosmetic hands, 9,587 alignment systems, 653 pairs of orthotic joints and 3,390 pairs of crutches;

- repaired 25 prostheses (i.e. requiring more than two man hours each);
- fitted 604 new amputees with prostheses and 19 other persons with orthoses.
- organized dissemination presentations attended by over 1,000 members of the armed forces, 400 members of the police, 90 government officials, 150 members and staff

of the Cambodian Red Cross, 230 law

students and 75 journalists; - trained 12 National Society staff members who in turn reached civilians in various parts of the country, including almost 700 school pupils and tea-

chers.

Battambang, where amputees were fitted with artificial limbs manufactured on the premises, received growing numbers of victims as new areas in north-west Cambodia became accessible. A prosthetic/orthotic technician from the Japanese Red Cross Society trained for six weeks at the Battambang centre. Meanwhile, the workshop in Phnom Penh continued to produce components for various non-governmental agencies involved in making prostheses. The prosthetic/orthotic coordinator based in the Cambodian capital also supervised work in centres carrying out such activities in Viet Nam and Myanmar.

The ICRC continued to provide ad hoc medical assistance to first-aid posts, dispensaries and civilian and military hospitals treating the war-wounded. The level of this aid rose significantly during and after the government offensive against Pailin in early 1996, which caused heavy casualties. In conjunction with the Ministry of Health, the ICRC continued to run 12 blood-collection centres throughout Cambodia. An agreement was signed between the ICRC and the Ministry in August to extend the programme for one more year. Despite efforts by the ICRC and the Cambodian Red Cross Society to recruit new donors, the application of stricter criteria for the acceptance of donations caused the amount of blood collected to drop by 20%. As the year ended the ICRC was still looking for a reliable partner to take over the blood-transfusion programme in the long term.

There was a sharp increase in activities to promote knowledge of and compliance with humanitarian law. The ICRC worked closely with the Cambodian Red Cross Society to develop the latter's dissemination programme. Khmer dissemination officers were recruited across the country and trained for their task. They attended a week-long seminar on humanitarian law which also included the National Society's development officers. Over the year, the dissemination officers organized events attended by members of the armed forces, police and other armed groups, government officials, Cambodian Red Cross volunteers and the general public. Day-long presentations on humanitarian law were held for military officers and seminars were organized for instructors from all RCAF training establishments. The latter were given by the Bangkok-based delegate to the armed forces, who also had discussions with officials of the Ministry of National Defence on the systematic inclusion of humanitarian law in the military training programme. To back up these various activities the ICRC provided material in the Khmer language.

Discussions with the Dean of the Law Faculty at Phnom Penh University resulted in permission for the ICRC to provide 20 hours of lectures on humanitarian law and 60 hours of weekly group work during the semester beginning later in the year. A Cambodian consultant with a legal background was hired and trained, and the lectures began in November.

medical assistance and blood-collection

promotion of law of war

## **BANGKOK**

Regional delegation (People's Republic of China, Hong Kong, Japan, Laos, Democratic People's Republic of Korea, Republic of Korea, Macao, Mongolia, Taiwan, Thailand, Viet Nam)

Pacific, the organization merged its Bangkok and Hong Kong regional delegations in July and transferred to the Thai capital most of the activities previously conducted by the Hong Kong delegation. A sub-delegation with one delegate remained in Hong Kong.

The ICRC pursued its dialogue with the Thai authorities to promote the country's accession to the Additional Protocols.

The Bangkok regional delegation continued to monitor the situation along Thailand's borders with Cambodia and Myanmar. With some 90,000 displaced civilians from Myanmar living along the Thai-Myanmar border, and clashes between Myanmar's armed forces and insurgent groups occasionally spilling over onto Thai territory, ICRC delegates worked in conjunction with the Thai Red Cross Society to make contact with the various groups involved, assess the situation of displaced people and spread knowledge of humanitarian law.

As there was no major tension along the Thai-Cambodian border, the ICRC handed over its remaining stock of medical supplies to the civilian hospital in Aranyaprathet. It was able to gain access via Thai territory to the Phnom Malai area of Cambodia, thus enabling Cambodia-based delegates to carry out a survey of needs there.

The workload of the ICRC's tracing service in Bangkok increased owing both to the merger with the Hong Kong delegation and the transfer to Bangkok from Phnom Penh of the Cambodia tracing databank.

The media liaison office attached to the regional delegation continued to cultivate contacts with local journalists and to make the ICRC better known to the Thai media. It also produced radio programmes and was closely involved in the ICRC's campaign for a worldwide ban on anti-personnel mines.

A delegate to the armed forces joined the regional delegation in May to promote instruction in international humanitarian law within the region's police and armed forces, in cooperation with his colleague in New Delhi, the ultimate aim being to achieve full incorporation of that body of law into the training syllabus.

The deputy regional delegate travelled to Laos early in the year to discuss with the authorities there the promotion of humanitarian law and the problem of unexploded ordnance, which injures and kills a great number of civilians in certain areas. In July the regional delegate went to Vientiane for talks with the Lao Red Cross on wider ICRC cooperation with that Society, and with government officials on measures at the national level to implement humanitarian law.

cooperation with National Societies of the region

Cooperation with the Red Cross of Viet Nam continued in the form of training to restore family contacts and work to promote compliance with humanitarian law. Unfortunately, the plan to have a foreign partner take over the ICRC's part of the prosthetic/orthotic programme in Ho Chi Minh City, which it had been carrying out for six years in conjunction with the Ministry of Labour, Disabled Soldiers and Social Welfare, proved impracticable. As the year ended, the regional delegation was studying various possibilities for ensuring continued production and fitting of artificial limbs for destitute amputees (150 per month), which the ICRC is currently financing through its Special Fund for the Disabled.

Ties with the Red Cross Society of China (RCSC) were further strengthened, particularly in the area of promoting compliance with humanitarian law and training in methods of restoring contact between members of families separated by conflict. The ICRC held a training seminar for RCSC tracing officers and, in conjunction with the National Society, organized a five-day course on humanitarian law for senior representatives of provincial branches and the Society's headquarters. No progress was achieved in efforts to expand the scope of ICRC activities in the People's Republic.

The ICRC Delegates General for Asia and the Pacific and for Africa travelled to Tokyo for talks with the Ministry of Foreign Affairs and the Japanese Red Cross Society on ICRC operations and Japan's cooperation with the organization. Discussions also continued with a view to ratifying the Additional Protocols.

The regional delegate took part in a basic training course at the Japanese Red Cross to prepare members of its staff for overseas missions. Subjects included the ICRC's mandate and fundamental points of humanitarian law. A Geneva-based orthopaedic technician travelled to Japan to discuss cooperation in this field between the ICRC and the Japanese Red Cross.

The regional delegate visited the Democratic People's Republic of Korea to discuss the potential for future cooperation, particularly in promoting knowledge of humanitarian law. He also passed on to North Korea's National Society a tracing request and a number of Red Cross messages relating to families split up by the Korean conflict.

The regional delegate gave lectures at three universities in the Republic of Korea and the Deputy Delegate General for Asia and the Pacific took part in the first basic training course organized by South Korea's National Society to prepare staff for overseas missions. The ICRC continued to recommend to the South Korean authorities that they recognize the competence of the International Fact-Finding Commission and to enhance national measures to implement international humanitarian law.

The regional delegation closely followed incidents between the two Koreas and made representations to the authorities concerned. In October it offered its services in connection with the incident in which a submarine from North Korea ran aground in South Korean waters and the subsequent capture by

South Korean security forces of one of the crew members.

The regional delegate travelled to Mongolia to present the authorities and the Red Cross Society with the newly published Mongolian-language translation of the Geneva Conventions and their Additional Protocols, which the ICRC had had printed in Hong Kong. The ICRC also organized four

university lectures at Mongolian faculties of law.

In March, the Delegate General for Asia and the Pacific went to Hong Kong and Macao to officially inform the local authorities, local Red Cross branches and diplomats of the ICRC's plan to merge its Hong Kong and Bangkok delegations. The ICRC worked with the University of Hong Kong to organize a well-attended seminar there on international humanitarian law and fundamental judicial guarantees.

### IN 1996, THE ICRC:



issued 221 travel documents, the vast majority to refugees for resettlement in third countries.



 manufactured, at its prosthetic/orthotic project in Ho Chi Minh City, 2,521 artificial limbs (including 1,788 for 1,721 destitute amputees). As the year ended, 2,033 persons remained on the waiting list.

#### **JAKARTA**

Regional delegation (Brunei Darussalam, Indonesia/ East Timor, Malaysia, Singapore)

A fter a joint ICRC-Federation visit to Brunei Darussalam in March and subsequent separate visits by representatives of both organizations to assess the development of the country's emerging National Society, which had applied for recognition in 1995, the ICRC officially recognized the Brunei Darussalam Red Crescent Society in November.

Jakarta-based delegates conducted six-monthly and yearly visits to places of detention in various parts of Indonesia. In conjunction with the Indonesian Red Cross Society (PMI), they provided material and medical assistance where necessary. In Aceh delegates had access for the first time to facilities run by the Special Forces.

The ICRC also engaged in related activities such as following up detainee releases and facilitating visits by families of detainees serving sentences far from their homes

In the wake of the July demonstrations in Jakarta that followed the storming by Indonesian troops of the Indonesian Democracy Party headquarters, the ICRC visited people detained in connection with the disturbances.

Tension continued in East Timor. The disturbances included clashes between young Timorese and the security forces, and fighting between those forces and the armed opposition. When incidents occurred, delegates went rapidly to the scene to act as a neutral intermediary between the authorities and civilians and to monitor respect for humanitarian law. They visited detainees in prisons and interrogation centres on the island, including a number of detainees who were visited for the first time.

The ICRC/PMI water and sanitation programme was maintained, as were the various public health projects. These required a constant ICRC presence in remote areas. Five teams carried out a broad range of projects, including hydro-geological surveys, sinking wells and building extensive distribution networks to provide water to widely dispersed hamlets. An expatriate engineer continued to guarantee quality and provide training and technical advice. A second team of nurses was formed to consolidate the public health education programme. Instruction in hygiene and disease prevention and talks on the Red Cross were given primarily to mothers and children.

The ICRC organized a wide-ranging tour through 12 provincial districts to promote knowledge of and compliance with humanitarian law at all levels of the military, the police, government services and the civilian population.

continued tensions in East Timor

Acting in its capacity as a neutral intermediary, the ICRC organized the transfer to Portugal of Timorese who had sought asylum in foreign embassies, former civil servants of the Portuguese colonial administration and a number of hardship cases. Delegates made arrangements for their journey, issued travel documents for them and contacted the Portuguese Red Cross, which welcomed them on their arrival in Lisbon. The ICRC's tracing service and the National Society continued to forward Red Cross messages between East Timor and Portugal.

efforts to promote humanitarian law in Indonesia

Events to promote knowledge of humanitarian law and the International Red Cross and Red Crescent Movement were regularly organized for the Indonesian armed forces, police, Indonesian Red Cross members and staff, journalists and academic circles. For the latter, a week-long seminar for about 20 law professors from various private and public universities throughout the country was organized in order to enable them to increase their knowledge of humanitarian law, to distinguish it from human rights law and to share their teaching experiences.

In conjunction with the Indonesian Minister of Foreign Affairs and the National Society, the ICRC hosted a seminar on international humanitarian law in Jakarta in June. There were over 100 participants, including senior government representatives of the ASEAN\* countries and of Cambodia, Laos,

Myanmar and Papua New Guinea.

To help resolve the January hostage-taking in Irian Jaya by members of the OPM,\* the ICRC acted as a neutral intermediary, with the consent of all the parties concerned. Delegates managed to contact the OPM, visit the hostages, distribute medicines, blankets, clothing and food, and collect personal messages to their families. After three months, however, the conditions for constructive dialogue no longer existed and the ICRC withdrew its services. A week later the Indonesian armed forces carried out a rescue operation, as a result of which nine hostages were released, two were killed and hundreds of villagers fled their homes.

The events in East Timor, the hostage-taking in Irian Jaya and the ASEAN dissemination seminar in Jakarta generated media interest in ICRC operations in the region. The delegation therefore hired a media liaison officer to build up

contacts with Indonesian and foreign journalists.

The regional delegation's activities in Malaysia once again focused on spreading knowledge of humanitarian law. Courses were organized for the Malaysian military — including UN peace-keeping troops — and members and staff of the Malaysian Red Crescent Society.

hostage crisis in Irian Jaya

<sup>\*</sup> ASEAN: Association of South-East Asian Nations (Brunei, Indonesia, Malaysia, Philippines, Singapore, Thailand and Viet Nam)

<sup>\*</sup> OPM: Organisasi Papua Merdeka, or Free Papua Movement

JAYAPT A BRIDGE STORY



visited 133 detainees in 38 places of detention in Indonesia and 247 persons
 161 of them for the first

time – being held in 28 places of detention in connection with the situation in East Timor;

financed family visits for 101 detainees.

### IN 1996, THE ICRC:



- issued 186 travel documents;
- organized the transfer to Portugal of 189 East Timo-

rese (former civil servants in the Portuguese colonial administration and hardship cases) who had sought asylum in foreign embassies;  forwarded 437 Red Cross messages between East Timorese living in East Timor and relatives living elsewhere.



 harnessed 15 fresh-water springs and maintained 30 existing water-supply systems in East Timor.

**MANILA** 

Regional delegation (Australia, Fiji, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, New Zealand, Palau, Papua New Guinea, Philippines, Solomon Islands, Tonga, Tuvalu, Vanuatu, Western Samoa and the other island territories of the Pacific)

The regional delegation in Manila changed its structure somewhat in 1996 with the addition of a part-time ICRC representative for the Pacific, based in Fiji. The newly appointed representative was active primarily in promoting knowledge of and compliance with international humanitarian law across the region, thus leaving the Manila-based regional delegate more time to concentrate on the Philippines, Papua New Guinea, Australia and New Zealand.

Both the Fiji-based ICRC representative and the regional delegate travelled extensively in the south Pacific to maintain contacts with governments and National Societies. In July the regional delegate took part in the Pacific Red Cross Societies' VIIth Programme Meeting, in Western Samoa.

Like all ICRC delegations, the Manila delegation worked to promote adherence to the various instruments of international humanitarian law by the States within its region. In June, Palau acceded to the four Geneva Conventions and their Additional Protocols. In July, the Philippines ratified the 1980 UN Weapons Convention and three of its four Protocols.

In addition to its basic task of cultivating relations between the ICRC and the region's media, the information office in Sydney was involved in a range of other activities, including serving as a link between the ICRC's Jakarta delegation and Australia-based representatives of the Free Papua Movement during the hostage crisis in Irian Jaya, and contacts with the Australian Red Cross Society.

The signing in September of a peace agreement between the Philippines government and the Moro National Liberation Front brought the south of the country a step closer to peace. However, violence continued as groups not party to the agreement carried on the armed struggle. At the end of the year preliminary talks were announced between the government and the Moro Islamic Liberation Front, even as other armed groups urged a united front against the peace accord.

The ICRC continued to make regular visits to people detained in connection with armed political resistance in the Philippines and, where necessary, returned to prisons for ad hoc visits. ICRC staff carried out anti-scabies and

disinfestation programmes in a number of prisons and paid the cost of medical treatment for detainees lacking the means to pay for it themselves. Direct medical care was also provided in some cases. In conjunction with the Philippine National Red Cross (PNRC), the delegation organized and financed a series of family visits to detainees who requested such assistance and whose families could not afford the travel costs.

The delegation's tracing service concentrated on detention-related activities as its workload from other traditional activities in the country diminished.

In its endeavour to ensure that the civilian population was spared the effects of the violence, the delegation adopted a two-pronged approach: collecting information regarding violations of humanitarian law and then making representations to the parties concerned, and providing assistance to civilians affected by fighting. Thousands of civilians fled sporadic clashes between the Philippine armed forces and the Moro Islamic Liberation Front. Working with local branches of the PNRC, delegates distributed both food and non-food relief to families in Maguindanao, Sultan Kudarat, North Cotabato and Basilan. The ICRC paid the cost of treatment for a number of civilians injured in the crossfire. With the ICRC acting as a neutral intermediary, the New People's Army released two members of the Philippine armed forces whom it had detained for five months.

An ICRC doctor based at the Jakarta regional delegation held a workshop at Bacolod Regional Hospital, dealing mostly with the management of war wounds and the rights and obligations of medical professionals during armed conflict.

The delegation stepped up its work to promote knowledge of humanitarian law among armed forces personnel and PNRC staff. It also provided material both on that law and on the ICRC's work to non-governmental organizations, government agencies and universities. In July the Bangkok-based delegate to the armed forces held a seminar for officers from all three branches of the armed forces. In September he organized a presentation for cadets at the Philippine Military Academy and in October a workshop for military instructors. It is hoped that humanitarian law will eventually be incorporated into the military's general training programme. Sessions for active armed units were also held in the field, including courses for combatants belonging to Muslim secessionist groups. ICRC field officers gave talks on the law of war as part of their day-to-day work. The delegation also actively supported the National Society's own dissemination work at both national and local level.

The situation in Bougainville remained tense in 1996. The year-long ceasefire between the Papua New Guinea Defence Force and the BRA\* ended and visits to detainees

promoting humanitarian law

<sup>\*</sup> BRA: Bougainville Revolutionary Army

further violence erupted. Tens of thousands of people fled their homes to escape the fighting. With the conflict in its eighth year the ICRC offered its services to the authorities of Papua New Guinea, proposing activities to promote knowledge of and compliance with humanitarian law among the armed forces and the BRA, protection work for the civilian population, restoring family contact and, where needed, food and medical relief for civilians living in BRA-controlled areas. The delegation in Manila also monitored the situation of refugees from Bougainville living in the Solomon Islands. As the period under review ended, the ICRC was still waiting for a reply from the Papua New Guinea government.

MANUA de le gation



- visited 437 detainees in 95 places of detention in the Philippines, registering 168 of them for the first

time;

 financed family visits for 198 detainees in the Philippines.

#### IN 1996, THE ICRC:



- distributed relief to some 3,000 families displaced by fighting in the Philippines.
- in the Philippines, organized events for over 250 members of the armed forces, 665 members of the Moro National Liberation Front and
- 1,580 members of the Moro Islamic Liberation Front;
- organized events for 70 police officers in Fiji and for 20 in Vanuatu.